



Department of Property & Procurement

Government of the United States Virgin Islands

3274 ESTATE RICHMOND, CHRISTIANSTED, U. S. VIRGIN ISLANDS 00820

8201 SUB BASE, 3RD FLOOR, ST. THOMAS, U. S. VIRGIN ISLANDS 00802

ST. CROIX MAIN OFFICE: 340.773.1561 | ST. THOMAS MAIN OFFICE: 340.774.0828

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[HTTP://DPP.VI.GOV](http://DPP.VI.GOV)



September 9, 2015

AMENDMENT # 2 RFP-023-2015(P) Qualified firm or individual(s) to provide Computerization of Corporation and Trademarks Division through web access

INSERT: *ADDITIONAL* Question/Answer(s)

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

BIDDERS MUST ACKNOWLEDGE RECEIPT OF THIS AMENDMENT WITH THEIR BID PROPOSAL.

QUESTION & ANSWER(s):

Question 1: How many documents are currently in the archive?

Answer: There are thousands dissolved records; however, the computerization of those documents are not included as part of this scope.

Question 2: Are all the documents the same size and layout?

Answer: There are two sizes of the documents – the standard letter (8 ½ x 11) and legal (8 ½ x 14).

Question 3: Any irregular shaped documents like or certificates?

Answer: There are no irregular shaped documents on file with office.

Question 4: How many index field are required?

Answer: There are various registration types that are as follows:

- i. Trade Name registration application for sole proprietor, partnership, corporation, LLC, LP, LLP and LLP. The form is attached.
- ii. Trade Name renewal application for sole proprietor, partnership, corporation, LLC, LP LLP and LLP. The form is attached.
- iii. Trade Name withdrawal application sole proprietor, partnership, corporation, LLC, LP, LLP and LLP. The form is attached.
- iv. Formation for corporations (domestic, non-profit, professional, unions, Virgin Islands FSC, alien and exempt), LLC, LP, LLP and LLP - Customer drafts articles.

- v. Registration of foreign entities (corporation, non-profit, professional, LLC, LP LLP and LLLP) - Certified documents are remitted along with other required information.
- vi. Amendments, changes of principal office and/or resident agent, resident agent resignation, mergers, dissolution, revival, domestication into and out of USVI for corporations (domestic, non-profit, professional, unions, Virgin Islands FSC, and exempt), LLC, LP, LLP and LLP - Customer drafts and execute the documents.
- vii. Amendments, change or resignation of the resident agent, merger for foreign entities (corporation, non-profit, professional, unions, LLC, LP, LLP and LLLP) - Certified documents are remitted along with other required information, if applicable.
- viii. Withdrawal for foreign entities (corporation, non-profit, professional, LLC, LP LLP and LLLP) - Customer drafts and files notice onto office with a fee.

I am also including the link to access the Virgin Islands Cord which is below as we as a list of the titles and chapters pertaining to the corporation registry.

<http://www.lexisnexis.com/hottopics/vicode/>

UCC Commercial Code – Title 11A, Article 9

Trade Name – Title 11, Chapter 21

Corporations (domestic, foreign, non-profit, professional, exempt, Virgin Islands FSC, and unions) and LLC – Title 13

Alien corporations – Title 14, Chapter 30, Section 611

LP, LLP, and LLLP – Title 26

Question 5: Are the indexed field defined for document sets/types?

Answer: YES.

Question 6: Can the scanning be performed off-site?

Answer: Scanning resources must be done on the premises.

Question 7: Are the scanning resources (equipment and human resources) available? Or, should they be provided by the vendor?

Answer: Scanning resources must be provided by the vendor.

Question 8: Who will perform the record's audit?

Answer: The vendor will perform the record audit after receiving training from the division.

Question 9: What is the estimated user count?

Answer: Thousands.

Question 10: What are the different access levels/security or user types required?

Answer: The access level for staff of the division is employee (enter information) and supervisor (enter, review, correct, and delete information). The access level for the general public is view privileges only. For the owners of the business, they must be able to enter information and view their complete records solely. Other government agencies need limited view and copy printing privileges while IRB and IRS needs full access to view and copy all records.

Question 11: What devices and operating systems will be used to access system?

Answer: It should be a web-based access system.

Question 12: Any there any other systems currently communicating with it?

Answer: There are no other systems this office is communicating with at this time.

Question 13: What forms of payments will be handled electronically by BPPR? Credit Card/Debit-Pin Cards/ACH? Others? Any monthly/recurring transaction agreements?

Answer: We would like to be able to process electronically payments such as credit cards, debit ACH and electronic checks. There are no monthly or recurring transactions agreements.

Question 14: Any accessibility requirements to address access for people with physical, sensory or cognitive disabilities?

Answer: That is not a part of this scope, but eventually we will need to make provisions in the future.

Question 15: Any specific platforms required? i.e.: Just Desktop version, or Desktop and Mobile.

Answer: We would like a desktop version initially with the option in future to have mobile services.

Question 16: Does the USVI have its own trademarks/patent process?

Answer: The USVI only processes trademarks that are issued at the USPTO. The USPTO does vetting, registration, renewal and assignment of the marks. This office requires a certified certificate of registration or assignment digest with a fee to issue a certificate in the Virgin Islands.

Question 17: Is this an integration requirement with the USPO or just a handoff/link to the USPO?

Answer: It is not an integrated requirement with the USPTO. Since this office does not have the expertise or the human resources to process trademarks, rules and regulations were promulgated for this jurisdiction to accept only federally

registered marks process at the USPTO. We provide the link to USPTO for customer to complete that process and thereafter they may filed a certified certificate with this office.



THE UNITED STATES VIRGIN ISLANDS
OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS

5049 Kongens Gade
Charlotte Amalie, Virgin Islands 00802
Phone - 340.776.8515
Fax - 340.776.4612

1105 King Street
Christiansted, Virgin Islands 00820
Phone - 340.773.6449
Fax - 340.773.0330

APPLICATION FOR REGISTRATION OF A TRADE NAME – TNR12

- A trade name is not considered registered unless and until you are in receipt of the certified Certificate of Trade Name is issued by this office. You are cautioned against relying on an unofficial representation. The Office of the Lieutenant Governor nor the Division of Corporations and Trademarks shall not be held responsible for any costs incurred as a result of a client moving forward without proper registration.
- The Director reserves the right to reject any application for registration.
- This form is for use by sole proprietors, partnerships or associations of individuals.
- This form cannot be used for Corporations, LPs, LLPs, LLLPs or LC.
- This form must be completed in its entirety. Failure to do so will result in rejection of the application document.
- One (1) original application, with original signature(s) and original notary authentication, must be submitted.
- The application must be submitted free of obliterated text (no strike through marks, no corrective fluid/tape). Evidence of obliteration will result in the rejection of the application document.
- A trade name registered in accordance with the provisions of V.I.C. title 11, Chapter 21, shall not be the same as nor so similar as to cause confusion with the trade name of any person, partnership, association or corporation, foreign or domestic, doing business under such trade name in the United States Virgin Islands. This office will make that determination.
- A fee of \$25 must accompany this application. If the application is mailed, be certain to include a check or money order payable to the **GOVERNMENT OF THE VIRGIN ISLANDS**. The envelope must be addressed to **THE OFFICE OF THE LIEUTENANT GOVERNOR – DIVISION OF CORPORATIONS AND TRADEMARKS; 5049 KONGENS GADE; ST. THOMAS, VIRGIN ISLANDS 00802.**
- A fee of \$250.00 guarantees 24-hour processing of this application document.
- All trade name registrations must be renewed bi-annually (every two (2) years), on the anniversary of original registration, at a fee of \$50.00. Failure to do so will result in the cancellation of the registration.



THE UNITED STATES VIRGIN ISLANDS
OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS

APPLICATION FOR REGISTRATION OF TRADE NAME

VIRGIN ISLANDS CODE – TITLE 11 – CHAPTER 21

LAST NAME

FIRST NAME

EMAIL ADDRESS

BEST DAYTIME CONTACT NUMBER(S)/CELL PHONE

FOR OFFICIAL USE ONLY

DATE RECEIVED

RECEIVED BY

PAYMENT RECEIVED

PAYMENT TYPE

RECEIPT NO.

TERRITORY or STATE OF

JUDICIAL DISTRICT or COUNTY OF

The undersigned parties, comprising a co-partnership or an association of individuals other than a corporation, conducting or intending to conduct a business in the United States Virgin Islands, hereby requests that the trade name, set forth below, under which said business shall be conducted, be registered in accordance with the provisions of Chapter 21, Title 11 of the Virgin Islands Code, and we certify the following:

PLEASE TYPE OR PRINT

TRADE NAME

NATURE OF BUSINESS

LOCATION OF BUSINESS

NOTE: This must be a physical address.

CITY

ISLAND

ZIP CODE

True and real names of all persons and/or entities wishing to register this trade name must appear below. Persons or entities who currently reside in the United States Virgin Islands must complete and sign page one, below, and submit this application under notary acknowledgement. Should there be more than two (2) organizers, please submit the name, full mailing address, email address and signature of each additional member, under notary acknowledgement, on a second sheet, making that sheet an addendum to this application.

Persons and/or entities that do not reside, or are not of the United States Virgin Islands, must skip the section below and continue onto Page 2. If the organizers are not residents of, and are not currently residing in the United States Virgin Islands, a Resident Agent must be named. A Resident Agent is an individual designated to receive service of process when a business entity is a party in a legal action, such as a summons or lawsuit. The Resident Agent must reside in the United States Virgin Islands. The Resident Agent must submit, under notary acknowledgement, a Consent of Resident Agent Form. Failure to submit the Consent of Resident Agent Form will render this application null and void.

I DECLARE, UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE UNITED STATES VIRGIN ISLANDS, THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION, AND ANY ACCOMPANYING DOCUMENTS, ARE TRUE AND CORRECT, WITH FULL KNOWLEDGE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE SUBJECT TO INVESTIGATION AND THAT ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF REGISTRATION.

FIRST NAME

LAST NAME

SIGNATURE

EMAIL ADDRESS

MAILING ADDRESS

CITY

ISLAND

ZIP CODE

FIRST NAME

LAST NAME

SIGNATURE

EMAIL ADDRESS

MAILING ADDRESS

CITY

ISLAND

ZIP CODE

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____

Notary Public

My Commission Expires _____

NON-RESIDENT PARTNERS OR MEMBERS OF ASSOCIATION, PLEASE COMPLETE THE FOLLOWING –
TERRITORY or STATE OF _____)
JUDICIAL DISTRICT or COUNTY OF _____)

The undersigned, non-resident of the United States Virgin Islands, doing business in the United States Virgin Islands, as a partner or member in the firm, under the trade name _____ hereby subscribes to the application for registration of trade name and appoints _____, a person residing in the United States Virgin Islands and having an office or place of business located at _____ as his Resident Agent upon whom process against the undersigned may be served in an action founded upon a liability incurred within the United States Virgin Islands.

I DECLARE, UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE UNITED STATES VIRGIN ISLANDS, THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION, AND ANY ACCOMPANYING DOCUMENTS, ARE TRUE AND CORRECT, WITH FULL KNOWLEDGE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE SUBJECT TO INVESTIGATION AND THAT ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF REGISTRATION.

FIRST NAME _____ LAST NAME _____

SIGNATURE _____

EMAIL ADDRESS _____

MAILING ADDRESS _____

CITY _____ ISLAND _____ ZIP CODE _____

Subscribed and sworn to before me this _____ day of _____, _____

Notary Public

My Commission Expires

The undersigned, non-resident of the United States Virgin Islands, doing business in the United States Virgin Islands, as a partner or member in the firm, under the trade name _____ hereby subscribes to the application for registration of trade name and appoints _____, a person residing in the United States Virgin Islands and having an office or place of business located at _____ as his Resident Agent upon whom process against the undersigned may be served in an action founded upon a liability incurred within the United States Virgin Islands.

I DECLARE, UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE UNITED STATES VIRGIN ISLANDS, THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION, AND ANY ACCOMPANYING DOCUMENTS, ARE TRUE AND CORRECT, WITH FULL KNOWLEDGE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE SUBJECT TO INVESTIGATION AND THAT ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF REGISTRATION.

FIRST NAME _____ LAST NAME _____

SIGNATURE _____

EMAIL ADDRESS _____

MAILING ADDRESS _____

CITY _____ ISLAND _____ ZIP CODE _____

Subscribed and sworn to before me this _____ day of _____, _____

Notary Public

My Commission Expires



THE UNITED STATES VIRGIN ISLANDS
OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS

5049 Kongens Gade
Charlotte Amalie, Virgin Islands 00802
Phone - 340.776.8515
Fax - 340.776.4612

1105 King Street
Christiansted, Virgin Islands 00820
Phone - 340.773.6449
Fax - 340.773.0330

**APPLICATION FOR REGISTRATION OF A TRADE NAME
UNDER A CORPORATION – TNC12**

- A corporation cannot deceptively or falsely suggest that the organization, so denoted, is of a charitable or non-profit nature when the organization is, in fact, of a profit making nature.
- A trade name is not considered registered unless and until you are in receipt of the certified Certificate of Trade Name is issued by this office. You are cautioned against relying on an unofficial representation. The Office of the Lieutenant Governor nor the Division of Corporations and Trademarks shall not be held responsible for any costs incurred as a result of a client moving forward without proper registration.
- The Director reserves the right to reject any application for registration.
- This form is for use by corporations only.
- This form cannot be used for sole proprietorships, partnerships, limited liability companies, limited partnerships, limited liability partnerships, limited liability limited partnerships.
- This form must be completed in its entirety. Failure to do so will result in the rejection of the application document.
- One (1) original application, with original signature(s) and original notary authentication must be submitted.
- The application must be submitted free of obliterated text (no strike through marks, no corrective fluid/tape). Evidence of obliteration will result in the rejection of the application document.
- A trade name registered in accordance with the provisions of V.I.C. title 11, Chapter 21, shall not be the same as nor so similar as to cause confusion with the trade name of any person, partnership, association or corporation, foreign or domestic, doing business under such trade name in the United States Virgin Islands. This office will make that determination.
- A fee of \$25 must accompany the application. If the application is mailed, be certain to include a check or money order payable to the **GOVERNMENT OF THE VIRGIN ISLANDS**. The envelope must be addressed to **THE OFFICE OF THE LIEUTENANT GOVERNOR – DIVISION OF CORPORATIONS AND TRADEMARKS; 5049 KONGENS GADE; ST. THOMAS, VIRGIN ISLANDS 00802.**
- A fee of \$250.00 guarantees 24-hour processing of this application document.
- All trade name registrations must be renewed bi-annually (every two (2) years), on the anniversary of original registration, at a fee of \$50.00. Failure to do so will result in the cancellation of the registration.



THE UNITED STATES VIRGIN ISLANDS
OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS

**APPLICATION FOR REGISTRATION OF TRADE NAME
UNDER A CORPORATION**

VIRGIN ISLANDS CODE - TITLE 11 - CHAPTER 21

LAST NAME OF THE PRESIDENT/VICE PRESIDENT

FIRST NAME OF THE PRESIDENT/VICE PRESIDENT

MAILING ADDRESS

EMAIL ADDRESS

BEST DAYTIME CONTACT NUMBER(S)/CELL PHONE

TERRITORY or STATE OF

JUDICIAL DISTRICT or COUNTY OF

FOR OFFICIAL USE ONLY

DATE RECEIVED

RECEIVED BY

PAYMENT AMOUNT RECEIVED

PAYMENT TYPE

RECEIPT NO.

THIS IS TO CERTIFY THAT

a corporation, the principal office of which is located at

is doing, or intends to do business, in the United States Virgin Islands, and that this business is known, or is to be known, by the designation, name or style of

and that said business is located at

The kind of business to be transacted under said name is

IN WITNESS WHEREOF, THE SAID CORPORATION

has to these presents, affixed its corporate seal and caused the same to be subscribed and acknowledged by its _____ and _____ at the city of

_____ in the state (district) of _____ on the _____ day of _____.

BY AFFIXING MY SIGNATURE, I DECLARE, UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE UNITED STATES VIRGIN ISLANDS, THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION, AND ANY ACCOMPANYING DOCUMENTS, ARE TRUE AND CORRECT, WITH FULL KNOWLEDGE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE SUBJECT TO INVESTIGATION AND THAT ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF REGISTRATION.

AFFIX
CORPORATE SEAL
HERE

Corporation

President or Vice President

Secretary or Assistant Secretary

ACKNOWLEDGEMENT

TERRITORY OF THE VIRGIN ISLANDS _____)

JUDICIAL DISTRICT OF _____)

On this, the _____ day of _____, before me, the undersigned officer, _____ personally appeared who acknowledged himself/herself to be the President or Vice President _____, a Corporation, and that he/she as such is authorized to do so, executed the foregoing instrument for the purpose therein contained by signing his/her name of the corporation by himself/herself as _____.

IN WITNESS WHEREOF, I hereto set my hand and official seal.

Notary Public

My Commission Expires



THE UNITED STATES VIRGIN ISLANDS
OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS

5049 Kongens Gade
Charlotte Amalie, Virgin Islands 00802
Phone - 340.776.8515
Fax - 340.776.4612

1105 King Street
Christiansted, Virgin Islands 00820
Phone - 340.773.6449
Fax - 340.773.0330

**APPLICATION FOR REGISTRATION OF A TRADE NAME
UNDER A LIMITED LIABILITY COMPANY – TLLC12**

- A trade name is not considered registered unless and until you are in receipt of the certified Certificate of Trade Name is issued by this office. You are cautioned against relying on an unofficial representation. The Office of the Lieutenant Governor nor the Division of Corporations and Trademarks shall not be held responsible for any costs incurred as a result of a client moving forward without proper registration.
- The Director reserves the right to reject any application for registration.
- This form is for use by limited liability companies only.
- This form cannot be used for sole proprietorships, partnerships, corporations, limited partnerships, limited liability partnerships, limited liability limited partnerships.
- This form must be completed in its entirety. Failure to do so will result in the rejection of the application document.
- One (1) original application, with original signature(s) and original notary authentication must be submitted.
- The application must be submitted free of obliterated text (no strike through marks, no corrective fluid/tape). Evidence of obliteration will result in the rejection of the application document.
- A trade name registered in accordance with the provisions of V.I.C., Title 11, Chapter 21, shall not be the same as nor so similar as to cause confusion with the trade name of any person, partnership, association or corporation, foreign or domestic, doing business under such trade name in the United States Virgin Islands. This office will make that determination.
- A fee of \$50 must accompany the application. If the application is mailed, be certain to include a check or money order payable to the **GOVERNMENT OF THE VIRGIN ISLANDS**. The envelope must be addressed to **THE OFFICE OF THE LIEUTENANT GOVERNOR – DIVISION OF CORPORATIONS AND TRADEMARKS; 5049 KONGENS GADE; ST. THOMAS, VIRGIN ISLANDS 00802.**
- A fee of \$250.00, in addition to the \$25.00 registration fee, guarantees 24-hour processing of this application document.
- All trade name registrations must be renewed bi-annually (every two (2) years), on the anniversary of original registration, at a fee of \$50.00. Failure to do so will result in the cancellation of the registration.



THE UNITED STATES VIRGIN ISLANDS
OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS

**APPLICATION FOR REGISTRATION OF TRADE NAME
UNDER A LIMITED LIABILITY COMPANY**

VIRGIN ISLANDS CODE – TITLE 11 – CHAPTER 21

LAST NAME OF THE MANAGER or MEMBER

FIRST NAME OF THE MANAGER or MEMBER

MAILING ADDRESS

EMAIL ADDRESS

BEST DAYTIME CONTACT NUMBER(S)/CELL PHONE

FOR OFFICIAL USE ONLY

DATE RECEIVED

RECEIVED BY

PAYMENT AMOUNT RECEIVED

PAYMENT TYPE

RECEIPT NO.

TERRITORY or STATE OF

JUDICIAL DISTRICT or COUNTY OF

THIS IS TO CERTIFY THAT

a limited liability company, organized under the laws of _____, the principal office of which is located at _____, is doing or intends to do business in the United States Virgin Islands and that this business is known or is to be known by the designation, name or style of _____, that said business is located at _____, and that the kind of business to be conducted under said name is _____.

IN WITNESS WHEREOF, THE SAID LIMITED LIABILITY COMPANY _____ has to these presents and caused the name to be subscribed and acknowledged by its _____ at the city of _____ in the state (district) of _____ on the _____ day of _____.

I DECLARE, UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE UNITED STATES VIRGIN ISLANDS, THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION, AND ANY ACCOMPANYING DOCUMENTS, ARE TRUE AND CORRECT, WITH FULL KNOWLEDGE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE SUBJECT TO INVESTIGATION AND THAT ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF REGISTRATION.

MANAGER

Limited Liability Company

MEMBER

Printed Name

Printed Name

Signature

Signature

ACKNOWLEDGEMENT

TERRITORY OF THE VIRGIN ISLANDS)
JUDICIAL DISTRICT OF _____)

On this, the _____ day of _____, _____, before me, the undersigned _____ personally appeared who acknowledged himself/herself to be the Member or Manager of _____, a Limited Liability Company, and that he/she, as such being authorized so to do, executed the foregoing instrument for the purpose therein contained by signing the name of the Limited Liability Company.

IN WITNESS WHEREOF, I hereto set my hand and official seal.

Notary Public

My Commission Expires



THE UNITED STATES VIRGIN ISLANDS
OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS

5049 Kongens Gade
Charlotte Amalie, Virgin Islands 00802
Phone - 340.776.8515
Fax - 340.776.4612

1105 King Street
Christiansted, Virgin Islands 00820
Phone - 340.773.6449
Fax - 340.773.0330

APPLICATION FOR REGISTRATION OF A TRADE NAME –
UNDER A LIMITED LIABILITY PARTNERSHIP – TNRLP212

- A trade name is not considered registered unless and until you are in receipt of the certified Certificate of Trade Name is issued by this office. You are cautioned against relying on an unofficial representation. The Office of the Lieutenant Governor nor the Division of Corporations and Trademarks shall not be held responsible for any costs incurred as a result of a client moving forward without proper registration.
- The Director reserves the right to reject any application for registration.
- This form is for use by limited partnerships and limited liability limited partnerships only.
- This form cannot be used for sole proprietorships, partnerships, corporations, limited liability corporations, limited liability partnerships.
- This form must be completed in its entirety. Failure to do so will result in rejection of the application document.
- One (1) original application, with original signature(s) and original notary authentication, must be submitted.
- The application must be submitted free of obliterated text (no strike through marks, no corrective fluid/tape). Evidence of obliteration will result in the rejection of the application document.
- A trade name registered in accordance with the provisions of V.I.C. title 11, Chapter 21, shall not be the same as nor so similar as to cause confusion with the trade name of any person, partnership, association or corporation, foreign or domestic, doing business under such trade name in the United States Virgin Islands. This office will make that determination.
- A fee of \$25 must accompany this application. If the application is mailed, be certain to include a check or money order payable to the **GOVERNMENT OF THE VIRGIN ISLANDS**. The envelope must be addressed to **THE OFFICE OF THE LIEUTENANT GOVERNOR – DIVISION OF CORPORATIONS AND TRADEMARKS; 5049 KONGENS GADE; ST. THOMAS, VIRGIN ISLANDS 00802.**
- A fee of \$250.00, in addition to the registration fee of \$25.00, guarantees 24-hour processing of this application document.
- All trade name registrations must be renewed bi-annually (every two (2) years), on the anniversary of original registration, at a fee of \$50.00. Failure to do so will result in the cancellation of the registration.



THE UNITED STATES VIRGIN ISLANDS
OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS

APPLICATION FOR REGISTRATION OF TRADE NAME

UNDER A LIMITED LIABILITY PARTNERSHIP

CONTACT INFORMATION

LAST NAME

FIRST NAME

EMAIL ADDRESS

BEST DAYTIME CONTACT NUMBER(S)/CELL PHONE

TERRITORY or STATE OF

JUDICIAL DISTRICT or COUNTY OF

FOR OFFICIAL USE ONLY

DATE RECEIVED

RECEIVED BY

PAYMENT RECEIVED

PAYMENT TYPE

RECEIPT NO.

PLEASE TYPE OR PRINT

NAME OF LLP

TRADE NAME

NATURE OF BUSINESS

LOCATION OF BUSINESS

NOTE: This must be a physical address.

CITY

ISLAND

ZIP CODE

WE DECLARE, UNDER PENALTY OF PERJURY, THAT WE, THE UNDERSIGNED, ARE PARTNERS AUTHORIZED TO CONDUCT BUSINESS ON BEHALF OF THE LIMITED LIABILITY PARTNERSHIP ABOVE NOTED, THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION, AND ANY ACCOMPANYING DOCUMENTS, ARE TRUE AND CORRECT, WITH FULL KNOWLEDGE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE SUBJECT TO INVESTIGATION AND THAT ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF REGISTRATION.

FIRST NAME

LAST NAME

SIGNATURE

EMAIL ADDRESS

TITLE

MAILING ADDRESS

CITY

ISLAND

ZIP CODE

FIRST NAME

LAST NAME

SIGNATURE

EMAIL ADDRESS

TITLE

MAILING ADDRESS

CITY

ISLAND

ZIP CODE

FIRST NAME

LAST NAME

SIGNATURE

EMAIL ADDRESS

TITLE

MAILING ADDRESS

CITY

ISLAND

ZIP CODE

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____,

Notary Public

My Commission Expires _____